

Norfolk Utilities, Division of Water Quality Office of Cross Connection 6040 Waterworks Road Norfolk, Virginia 23502 (757) 441-5774 ext 262 or 274 Fax (757) 441-5639

APPLICATION FOR BACKFLOW DEVICE TESTER CLASS

Please complete the following information in black or blue ink only, attach a check or money order made payable to "Treasurer - City of Norfolk" for \$100.00 and forward to the address listed above.

Name	[Last]				
				[MI]	
E-mail					
Work Telep	ohone ()	_			
Employer					
Address					
				[Zip]	
Length of E	mployment	Type of Employment	t		
Applicant's Signature			Date		
		FOR OFFICE USE ONLY			
AMOUNT \$	CHECK#	LICENSE # ISSUED	EXPIRAT	TION DATE	
CLASS DATE					
EXAM SCORE	PER	RFORMANCE TESTING €	PASSED €	FAILED	
INSTRUCTOR	SIGNATURE				